

# CERTIFICATE OF OCCUPANCY CITY OF WAVELAND

that at the time of issuance, this structure was in compliance with the various ordinances of the City of Waveland regulating building construction or use. This Certificate is issued pursuant to the requirements of the 2012 International Codes Council certifying

Certificate #:1800143

Issued to: KENNY MONTI

Building Address: 251 FARRAR LN

City, State, Zip: WAVELAND, MS 39576

Issued Date: 11-13-2018 Expires: End of occupancy

Occupancy Type: SFR HOME

Sprinkler System Required: NO

Special Conditions: NONE

**Building Official** 

11-13.18

ate

2018 Recorded in the Above Deed Book & Page 10-18-2018 03:11:17 PM Timothy A Kellar Hancock County

# WAVELAND

### NONCONVERSION AGREEMENT with

CITY OF WAVELAND, MISSISSIPPI

	CITY OF WAVELAND, MISSISSIPPI Hancock County	
	I certify this instr	ument was filed on
41	This DECLARATION made this \( \) day of \( \) day \( \) \( \	PM
	DV book proceeded in 1999	Book
	251 Farar Cn. 2018 at Fages 12803	- 12903
	WITNESSETH: WHEREAS, the Owner is the record owner of all that real property located at  Timothy A Kellar	1 1
	in the City of Waveland, Ms. in the County of Hancock, designated in the Tax Records as 1677-0-10-133.000	1111
	designated in the Tax Records as 16ZJ-0-10-133.000	Astornal 19/
		THE CLOSES
	enclosed area below the base flood elevation constructed in accordance with the requirements of	The state of the s
	enclosed area below the base flood elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of the Waveland Floodplain Management Ordinance of Number 2800/4/	The same
	325 and under Permit Number 2800/49.	
	WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the	
	following covenants, conditions and restrictions are placed on the affected property as a condition of	10 8
	granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner.	1
	his heirs, personal representatives, successors, future owners, and assigns.	W. Tanana Baraga
		K COO " L
	UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:	
		3
	1. The structure or part thereof to which these conditions apply is:	ق ا
	2. At this site, the Base Flood Elevation is feet above mean sea level, National Geodetic	٤
	Vertical Datum.	nristophen month
		ટ્ટ
	3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited	ā
	storage, or access to the building. All interior walls, ceilings and floors below the Base Flood	卫
	Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or	5
	plumbing devices shall not be installed below the Base Flood Elevation.	- 6
	4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain	کج
	equipped with openings as shown on the Permit.	_ =(
	equipped with openings to show on the	D 7 0)
		ā 毛子/je
	5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal	signe with red th
	<ol><li>The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the</li></ol>	dersigne state, with wwety
	5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.	cock and state, ork with executed the
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.	of the same of the
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of	
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the properly for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration.	
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration.  Such inspections will be conducted upon due notice to the Owner and no more frequently than once	said country of Hamed C
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation	County of Hard before me, the said county of Colored county of Colored within named that HE and instrument.
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration.  Such inspections will be conducted upon due notice to the Owner and no more frequently than once	County of Hard before me, the said county of Colored County of Colored County in the county of the c
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation	County of Hard before me, the said county of Colored County of Colored County in the county of the c
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.	Aississippi, County of Hay appeared before me, in and for the said county of Color day of Color
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:	Aississippi, County of Hay appeared before me, in and for the said county of Color day of Color
9	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:	Aississippi, County of Hay appeared before me, in and for the said county of Color day of Color
9	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.	efore me, said coun Desobe hin named at HE
,	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:	Aississippi, County of Hay appeared before me, in and for the said county of Color day of Color
9	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:  In witness whereof the undersigned set their hands and seals this	Aississippi, County of Hay appeared before me, in and for the said county of Color day of Color
	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:  In witness whereof the undersigned set their hands and seals this	Aississippi, County of Hay appeared before me, in and for the said county of Color day of Color
9	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:  In witness whereof the undersigned set their hands and seals this	Aississippi, County of Hay appeared before me, in and for the said county of Color day of Color
7	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:  In witness whereof the undersigned set their hands and seals this	Aississippi, County of Hay appeared before me, in and for the said county of Color day of Color
,	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:  In witness whereof the undersigned set their hands and seals this	Aississippi, County of Hay appeared before me, in and for the said county of Caso and day of Caso and inction, the within named nowledged that HE and forecoing instrument.
_	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:  In witness whereof the undersigned set their hands and seals this	State of Mississippi, County of Harmonian State of Mississippi, County of Harmonian authority in and for the said count on this the within named who acknowledged that the shows and forecoing instrument.
_	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:  In witness whereof the undersigned set their hands and seals this	State of Mississippi, County of Harmonian State of Mississippi, County of Harmonian authority in and for the said count on this the within named who acknowledged that the shows and forecoing instrument.
_	action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.  6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.  7. Other conditions:  In witness whereof the undersigned set their hands and seals this	State of Mississippi, County of Harmonian State of Mississippi, County of Harmonian authority in and for the said count on this the within named who acknowledged that the shows and forecoing instrument.

# \*\*\* Certified Copy Page \*\*\*

I, Timothy A Kellar, Chancery Clerk, do hereby certify that the foregoing is a FULL, TRUE and CORRECT copy of the Instruments(s) herewith set out as same appears of record in: Deed BOOK - 2018, AT PAGE - 12803 in said court.

Witness my hand and seal this 18 Day of October, 2018.

Timothy A Kellar
Chancery Clerk
Hancock County, MS

Printed: 10-18-2018 03:11:55 PM Optical file reference: D3203.7E2

### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SEC	TION A - PROPERTY	INFO	RMATION		FOR INSU	RANCE COMPANY USE
A1. Building Own KENNY MONTI	er's Name			,		Policy Nun	nber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  251 FARRAR LANE					Company I	NAIC Number:	
City WAVELAND				State Mississippi	-	ZIP Code 39576	
A3. Property Desc TAX PARCEL # (1		nd Block Numbers, Ta 3.000)	x Parce	el Number, Legal De	escription, etc.)		
A4. Building Use (	e.g., Residen	itial, Non-Residential, <i>I</i>	Addition	n, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Long	tude: Lat. N	30-16-48	Long. V	V 89-22-53	Horizontal Datum	ı: NAD	1927 X NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if the	Certific	cate is being used t	o obtain flood insura	ince.	
A7. Building Diagr	am Number	5					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)	42.50	0 sq ft			
b) Number of	permanent flo	ood openings in the cra	wlspac	ce or enclosure(s) w	vithin 1.0 foot above	adjacent gr	ade 0
c) Total net ar	ea of flood op	penings in A8.b	) ;	sq in			( <del></del>
d) Engineered	flood openin	gs? Yes No	0				
A9. For a building	with an attach	ed garage:					
a) Square foo	tage of attach	ed garage0		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached g	garage within 1.0 fo	ot above adjacent g	rade	0
		enings in A9.b		sq in		-	
d) Engineered				3 · · · · · · · · · · · · · · · · · · ·			
	•		ner-excitation				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	ΓΙΟΝ	
B1. NFIP Communi WAVELAND 28526	1,50	ommunity Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel fective/	B8. Flood Zone(s)	(Zor	se Flood Elevation(s) ne AO, use Base
28045C0344	D	10/16/2009	10/16	evised Date /2009	AE	FIOC	od Depth) 19
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  [ FIS Profile X FIRM Community Determined Determined Other/Source:							
B11. Indicate eleva	tion datum us	sed for BFE in Item B9:	□ N	GVD 1929 🗵 NA	VD 1988	er/Source: _	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protec	ted Area (C	PA)? ☐ Yes ☒ No
Designation D	ate:	C	BRS	□ ОРА			

IMPORTANT: In these spaces, copy the corresponding information f	rom Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or F 251 FARRAR LANE	Policy Number:	
City State WAVELAND Mississippi	ZIP Code 39576	Company NAIC Number
SECTION C – BUILDING ELEVATION INF	ORMATION (SURVEY R	EQUIRED)
C1. Building elevations are based on: Construction Drawings*  *A new Elevation Certificate will be required when construction of the C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V Complete Items C2.a–h below according to the building diagram special Benchmark Utilized: USM NETWORK Vertical Indicate elevation datum used for the elevations in items a) through NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for a) Top of bottom floor (including basement, crawlspace, or enclosus) Top of the next higher floor  c) Bottom of the lowest horizontal structural member (V Zones only d) Attached garage (top of slab)  e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)  f) Lowest adjacent (finished) grade next to building (LAG)  g) Highest adjacent grade at lowest elevation of deck or stairs included.	Building Under Constructe building is complete.  (with BFE), AR, AR/A, AR ecified in Item A7. In Puerl Datum: NAVD 1988  h) below.  or the BFE.  re floor)	uction*
structural support		
SECTION D – SURVEYOR, ENGINEER, O  This certification is to be signed and sealed by a land surveyor, engineer, I certify that the information on this Certificate represents my best efforts statement may be punishable by fine or imprisonment under 18 U.S. Cod  Were latitude and longitude in Section A provided by a licensed land surv	or architect authorized by to interpret the data availar e, Section 1001. eyor? ⊠Yes ☐ No	law to cortifu alouation information
Certifier's Name DUKE LEVY 01722  Title SURVEYOR  Company Name DUKE LEVY & ASSOCIATES  Address 4412 LEISURE TIME DRIVE  City  License Numb 01722  State		DUKE LEVY  SERED PROCESSON  AND  Place  Sealy 22  Puttere  SURVEY  MISSISSI
City State DIAMONDHEAD Mississippi	ZIP Code 39526	The state of the s
Signature Date 10/15/2018  Copy all pages of this Elevation Certificate and all attachments for (1) communications.	Telephone (228) 467-5212 nity official. (2) insurance ad	gent/company, and (3) building owner
Comments (including type of equipment and location, per C2(e), if applical WO # 18-147-1 THE LOWEST MACHINERY SERVICING THE HOME IS AN A/C UNIT LOTHE HOME HAS AN ATTACHED CARPORT WITH ENCLOSED STORAGE STORAGE AREA IS AT 16.8' FEET.	ole) OCATED ON THE NORTH	SIDE.

### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

			Expiration Date. November 30, 2010
IMPORTANT: In these spaces, copy Building Street Address (including Ap 251 FARRAR LANE			FOR INSURANCE COMPANY USE Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption



Photo Two

Photo Two Caption

### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including a 251 FARRAR LANE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
WAVELAND	Mississippi	39576	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One

### Photo One Caption



Photo Two

### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

## **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SEC	TION A - PROPERTY	INFO	RMATION		FOR INSU	IRANCE COMPANY USE
A1. Building Own KENNY MONTI	er's Name				7.	Policy Nur	
<ul><li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li><li>251 FARRAR LANE</li></ul>					Company	NAIC Number:	
City WAVELAND				State Mississippi		ZIP Code 39576	
A3. Property Desc TAX PARCEL # (1		nd Block Numbers, Ta 3.000)	x Parce	el Number, Legal D	escription, etc.)		
A4. Building Use (	e.g., Resider	ntial, Non-Residential, A	Addition	n, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longi	tude: Lat. <u>N</u>	30-16-48	Long. \	V 89-22-53	Horizontal Datum	n: NAD	1927 X NAD 1983
A6. Attach at least	t 2 photograp	hs of the building if the	Certifi	cate is being used t	o obtain flood insura	ance.	
A7. Building Diagra	am Number	5					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawl	space or enclosure(s)		0 sq ft			
b) Number of	permanent flo	ood openings in the cra	wlspac	ce or enclosure(s) w	vithin 1.0 foot above	adjacent gr	rade0
c) Total net ar	ea of flood or	penings in A8.b0		sq in			
d) Engineered	flood openin	gs? 🗌 Yes 🗌 No	0				
A9. For a building v	with an attach	ned garage:					
a) Square foot	age of attach	ed garage0		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached g	garage within 1.0 fo	ot above adjacent g	rade	0
		enings in A9.b			, c		
d) Engineered							
,gcca	a opo	ae.					
	SE	CTION B – FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	ΓΙΟΝ	
B1. NFIP Communi WAVELAND 28526		ommunity Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E1	RM Panel fective/	B8. Flood Zone(s)	B9. Bas	se Flood Elevation(s) ne AO, use Base
28045C-0344	D	10/16/2009	10/16	evised Date /2009	AE	Floo	od Depth) 19
B10. Indicate the so	ource of the F	Base Flood Elevation (E	REE) da	ata or base flood de	nth entered in Item	RQ.	
		Community Determine					
B11. Indicate eleva	B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:						
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protec	ted Area (C	PPA)? ☐ Yes ☒ No
Designation D	ate:	C	BRS	□ ОРА			
	-						

IMPORTANT: In these spaces, copy the corresponding	g information from Se	ection A.	FOR	INSURANCE COMPANY US
Building Street Address (including Apt., Unit, Suite, and/o 251 FARRAR LANE	100000000000000000000000000000000000000	y Number:		
City Sta WAVELAND Mis	30 m	<sup>9</sup> Çode 576	Comp	pany NAIC Number
SECTION C – BUILDING EL	EVATION INFORMA	TION (SURVE	Y REQUIR	ED)
C1. Building elevations are based on: ☐ Construction  *A new Elevation Certificate will be required when constructions.  C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build Benchmark Utilized: ☐ USM NETWORK  Indicate elevation datum used for the elevations in item ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Statum used for building elevations must be the same	onstruction of the build VE, V1–V30, V (with Eding diagram specified Vertical Datum tems a) through h) belosource:	BFE), AR, AR/A in Item A7. In F : <u>NAVD 1988</u> ow.	, AR/AE, AR Puerto Rico (	only, enter meters.
a) Top of bottom floor (including basement, crawlsp	ace or enclosure floor	20.5		eck the measurement used.
b) Top of the next higher floor	ace, or enclosure moor	N/A		★ feet
c) Bottom of the lowest horizontal structural member	ar (V Zones only)			▼ feet
d) Attached garage (top of slab)	i (v Zories orily)	N/A		
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com	vicing the building ments)	20. 5		
f) Lowest adjacent (finished) grade next to building	(LAG)	15. 4		X feet meters
g) Highest adjacent (finished) grade next to building	(HAG)	15.8		
<ul> <li>h) Lowest adjacent grade at lowest elevation of dec structural support</li> </ul>	k or stairs, including	1 <u>5</u> . <u>6</u>		X feet ☐ meters
SECTION D – SURVEYOR,	ENGINEER, OR ARC	CHITECT CER	TIFICATIO	N
This certification is to be signed and sealed by a land sur- I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice	my best efforts to inter der 18 U.S. Code, Sec	pret the data av tion 1001. —	⁄ailable. I un	certify elevation information.  aderstand that any false  Check here if attachments.
Certifier's Name	License Number			
DUKE LEVY	01722			WE LEVI
Title SURVEYOR				PROPROPRIOR ENGINEER CO.
Company Name DUKE LEVY & ASSOCIATES				Place 7443 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Address 1711 WAVELAND AVE				SURVE OF MISS S
City WAVELAND	State Mississippi	ZIP Code 39576		Wife
Signature	Date 06/07/2018	Telephone (228) 467-521	2	
Copy all pages of this Elevation Certificate and all attachmen	its for (1) community off	icial, (2) insuran	ce agent/con	npany, and (3) building owner.
Comments (including type of equipment and location, per WO # 18-1417-1 AN A/C UNIT IS THE LOWEST MACHINERY LOCATED (		OF THE HOUS	SE.	

### U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

# ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY US
A1. Building Owner's Name JOHN AND TESSIE PARKER	Policy Number:
<ul> <li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li> <li>251 FARRAR LN</li> </ul>	Company NAIC Number:
City State WAVELAND Mississippi	ZIP Code 39576
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL # (162J-0-10-133.00)	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL	
A5. Latitude/Longitude: Lat. N 30-16-48 Long. W 89-22-53 Horizontal Datu	m: NAD 1927 X NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insur	rance.
A7. Building Diagram Number5	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s) sq ft	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above	e adjacent grade
c) Total net area of flood openings in A8.bsq in	370000000000000000000000000000000000000
d) Engineered flood openings?	
A9. For a building with an attached garage:	
a) Square footage of attached garage sq ft	
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent	nrada
c) Total net area of flood openings in A9.b sq in	grade
d) Engineered flood openings?	
ay Engineered flood openings?	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMA	ATION
B1. NFIP Community Name & Community Number B2. County Name	B3. State
WAVELAND 285262 HANCOCK	Mississippi
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel B8. Flood Zone(s)	) B9. Base Flood Elevation(s)
Revised Date	(Zone AO, use Base Flood Depth)
26045C-0344 D 10/16/2009 10/16/2009 AE	19
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item	, Ro
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:	109.
R11 Indicate alayation datum used to DEF in the Eq. (7) NOVO 1000 (7)	
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Oth	ner/Source:
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Prote	cted Area (OPA)? Yes X No
Designation Date: CBRS  OPA	

IMPORTANT: In these spaces, copy the correspo	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, a 251 FARRAR LN	Policy Number:				
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number		
SECTION C - BUILDIN	G ELEVATION INFO	RMATION (SURVEY R	REQUIRED)		
	truction Drawings* [ then construction of the BFE), VE, V1–V30, V (vertical Distriction of the building diagram spector of the building diagram of the building diagra	Building Under Construction  Building is complete.  Building is complete.	ruction* Finished Construction		
<ul> <li>c) Bottom of the lowest horizontal structural m</li> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or equipmen (Describe type of equipment and location in</li> <li>f) Lowest adjacent (finished) grade next to but</li> <li>g) Highest adjacent (finished) grade next to but</li> <li>h) Lowest adjacent grade at lowest elevation of structural support</li> </ul>	t servicing the building Comments) Iding (LAG) Ilding (HAG) f deck or stairs, includi		X   feet		
SECTION D – SURVEY	***************************************				
This certification is to be signed and sealed by a lan I certify that the information on this Certificate repressatatement may be punishable by fine or imprisonme.  Were latitude and longitude in Section A provided by	nt under 18 U.S. Code,  a licensed land surve	Interpret the data availa Section 1001. or? XYes No	law to certify elevation information.  ble. I understand that any false  Check here if attachments.		
Certifier's Name DUKE LEVY Title SUEVEYOR Company Name	License Number 01722		OUKE LEVI RED PROFESSOR Place		
DUKE LEVY & ASSOCIATES  Address 1711 WAVELAND AVE					
City WAVELAND	State Mississippi	ZIP Code 39576	A Wiles		
Signature	Date 07/13/2017	Telephone (228) 467-5212			
Copy all pages of this Elevation Certificate and all attac	hments for (1) communi	ty official, (2) insurance a	gent/company, and (3) building owner		
Comments (including type of equipment and location, WO # 17-166 TBM - PK NAIL W/DISK SET IN THE CENTERLINE ( EL = 15.87' FEET	per C2(e), if applicable	9)			

			- схрігаціон ра	te. November 30, 2018
IMPORTANT: In these spaces, copy the correspon			FOR INSURA	ANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 251 FARRAR LN	nd/or Bldg. No.) or P.C	. Route and Box No.	Policy Number	
City	State	ZIP Code	Company NA	IC Number
WAVELAND	Mississippi	39576		
SECTION E – BUILDING E FOR ZOI	LEVATION INFORM NE AO AND ZONE A	ATION (SURVEY N (WITHOUT BFE)	OT REQUIRED)	
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	1–E5. If the Certificate natural grade, if availa	is intended to suppo ble. Check the meas	ort a LOMA or LOM urement used. In I	IR-F request, Puerto Rico only,
E1. Provide elevation information for the following an the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement,	d check the appropriat adjacent grade (LAG)			
<ul> <li>crawlspace, or enclosure) is</li> <li>b) Top of bottom floor (including basement, crawlspace, or enclosure) is</li> </ul>	,			or below the HAG.
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provided in S			or ☐ below the LAG.  —2 of Instructions),
the diagrams) of the building is		feet me	eters above o	or below the HAG.
E3. Attached garage (top of slab) is		feet _ me	eters above o	or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	,	[] feet [] me	eters above o	or below the HAG.
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	ole, is the top of the bold No Unknown.	tom floor elevated in The local official mu	accordance with t	ha campu,
SECTION F - PROPERTY OW	NER (OR OWNER'S I	REPRESENTATIVE)	CERTIFICATION	
The property owner or owner's authorized representat community-issued BFE) or Zone AO must sign here. T	ive who completes So	tions A. D. and C.for	7 0 / 1/4	PP-14.
Property Owner or Owner's Authorized Representative		one right, and Editor	Softed to the pest	or my knowledge.
Address	City		State	ZIP Code
Signature	Date		Telephone	
Comments				
				Translation
				and control of the co
				ere if attachments

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, S 251 FARRAR LN	Policy Number:						
City WAVELAND	State ZIP Code Mississippi 39576		Company NAIC Number				
SECTION	ON G - COMMUNITY INFORMATION (OPT	IONAL)					
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	Certificate. Complete the applicable item(s)	Iplain man and sign	nagement ordinance can complete below. Check the measurement				
	ten from other documentation that has been ted by law to certify elevation information. (In						
G2. A community official completed Sect or Zone AO.	ion E for a building located in Zone A (withou	ut a FEMA	A-issued or community-issued BFE)				
G3. The following information (Items G4-	-G10) is provided for community floodplain n	nanageme	ent purposes.				
G4. Permit Number	G5. Date Permit Issued		late Certificate of ompliance/Occupancy Issued				
G7. This permit has been issued for:	New Construction Substantial Improve	ement					
G8. Elevation of as-built lowest floor (including of the building:	g basement)	☐ feet	meters Datum				
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters				
G10, Community's design flood elevation:		feet	meters Datum				
Local Official's Name	Title						
Community Name	Telephone						
Signature	Date						
Comments (including type of equipment and loc	cation, per C2(e), if applicable)						
			Check here if attachments.				